

For Office use only

Date registered:  
Envelope #

SAINT RAPHAEL PARISH  
W. Medford, MA

If you would like to receive  
parish Offertory envelopes,  
please check

Yes  
 No, not at this time

FAMILY NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE NUMBER ( ) \_\_\_\_\_ EMAIL \_\_\_\_\_

	Name	Date of Birth	Religion	Occupation
Husband				
Wife				

maiden name<sup>W</sup>

Children's Names	Date of Birth	Baptism	First Communion	Confirmation	Grade

Others Living with you	Date of Birth	Religion	Occupation